

JUN 15 2006

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Fax No. 572-273-8300

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FROM: Linda L. Berger (Typed or printed name of person signing Certificate)

Fax No. 513-634-3007

Phone No. 513-634-0885

Application No.: 10/623,882

Inventor(s): Kouichi Myamoto et al.

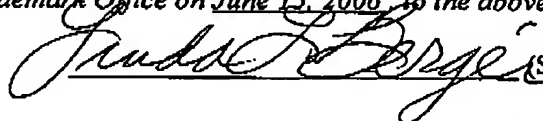
Filed: July 21, 2003

Docket No.: AA-600

Confirmation No.: 5166

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- 4)
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Comments:


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JUN 15 2006

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE PTO/SB/17 (1-06)

FEE TRANSMITTAL for FY 2006 Patent fees are subject to annual revision. Effective December 8, 2004	Complete if Known	
	Application Number	10/623,882
	Confirmation Number	5166
	Filing Date	July 21, 2003
	First Named Inventor	Kouichi Miyamoto et al.
	Examiner Name	Mark A. Osele
	Art Unit	1734
TOTAL AMOUNT OF PAYMENT (\$620)		Docket No. AA-600

METHOD OF PAYMENT 1. <input checked="" type="checkbox"/> The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to: Deposit Account Number: 16-2480 Deposit Account Name: The Procter & Gamble Company		FEE CALCULATION (continued) 5. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Fee Description</th> <th></th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Extension for reply within 1st month</td> <td>(\$120)</td> <td>[\$120]</td> </tr> <tr> <td>Extension for reply within 2nd month</td> <td>(\$450)</td> <td>[]</td> </tr> <tr> <td>Extension for reply within 3rd month</td> <td>(\$1,020)</td> <td>[]</td> </tr> <tr> <td>Extension for reply within 4th month</td> <td>(\$1,590)</td> <td>[]</td> </tr> <tr> <td>Extension for reply within 5th month</td> <td>(\$2,160)</td> <td>[]</td> </tr> <tr> <td>Information Disclosure Statement fee</td> <td>(\$180)</td> <td>[]</td> </tr> <tr> <td>37 CFR 1.16(f) Late Oath/Declaration (nonprovisional)</td> <td>(\$130)</td> <td>[]</td> </tr> <tr> <td>37 CFR 1.17 (q) Surcharge - Late provisional filing fee or cover sheet</td> <td>(\$50)</td> <td>[]</td> </tr> <tr> <td>Non-English specification</td> <td>(\$130)</td> <td>[]</td> </tr> <tr> <td>Notice of Appeal</td> <td>(\$500)</td> <td>[\$500]</td> </tr> <tr> <td>Filing a brief in support of an appeal</td> <td>(\$500)</td> <td>[]</td> </tr> <tr> <td>Request for oral hearing</td> <td>(\$1,000)</td> <td>[]</td> </tr> <tr> <td>Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)</td> <td>(\$1,370)</td> <td>[]</td> </tr> <tr> <td>Other:</td> <td></td> <td>[]</td> </tr> </tbody> </table>		Fee Description		Fee Paid	Extension for reply within 1 st month	(\$120)	[\$120]	Extension for reply within 2 nd month	(\$450)	[]	Extension for reply within 3 rd month	(\$1,020)	[]	Extension for reply within 4 th month	(\$1,590)	[]	Extension for reply within 5 th month	(\$2,160)	[]	Information Disclosure Statement fee	(\$180)	[]	37 CFR 1.16(f) Late Oath/Declaration (nonprovisional)	(\$130)	[]	37 CFR 1.17 (q) Surcharge - Late provisional filing fee or cover sheet	(\$50)	[]	Non-English specification	(\$130)	[]	Notice of Appeal	(\$500)	[\$500]	Filing a brief in support of an appeal	(\$500)	[]	Request for oral hearing	(\$1,000)	[]	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	(\$1,370)	[]	Other:		[]
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3. APPLICATION SIZE FEE: Sheets of Spec and Drawings [] (\$250 for each 50 sheets in excess of 100, except for sequence and program listings) SUBTOTAL (2)+(3) (\$)[]																																																
4. EXTRA CLAIM FEES FOR UTILITY AND REISSUE: <table border="1"> <thead> <tr> <th></th> <th>Extra Claims</th> <th>Fee from Below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims [] - 20** = [] x</td> <td></td> <td>[] =</td> <td>[]</td> </tr> <tr> <td>Independent Claims [] - 3** = [] x</td> <td></td> <td>[] =</td> <td>[]</td> </tr> <tr> <td>Multiple Dependent claims: [] =</td> <td></td> <td>[] =</td> <td>[]</td> </tr> </tbody> </table> ** or number previously paid, if greater; For Reissues, see below Fee Description Claims in excess of 20 (\$50 per claim) Independent claims in excess of 3 (\$200 per claim) Multiple dependent claim, if not paid (\$360) **Reissue: each independent claim over 3 and more than in the original patent (\$200 per claim) **Reissue claims: each claim over 20 and more than original patent (\$50 per claim) SUBTOTAL (4) (\$)[]			Extra Claims	Fee from Below	Fee Paid	Total Claims [] - 20** = [] x		[] =	[]	Independent Claims [] - 3** = [] x		[] =	[]	Multiple Dependent claims: [] =		[] =	[]																															
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Thibault Fayette	Registration No. (Attorney/Agent)	56,143
Signature		Telephone	(513) 634-7758
		Date	June 15, 2006

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Fee Transmittal Form (Revised for P&G use 04/25/2006)